

Kindergarten Round Up 2015–2016 Material Order Form

Materials are available for download at:

http://www.placer.ca.gov/departments/public-health/childrens-medical-services/child-health-disability-prevention/kindergarten-roundup

For printed materials complete this form and fax 916.784.6464 or email chdp@placer.ca.gov. Questions? Contact CHDP at 530.886.3620 or chdp@placer.ca.gov.

Item #	Item (Revision date)	Language	Description	Indicate quantity desired		
Health Examination						
1	CHDP School Handbook - accessible on the web at: http://www.dhcs.ca.gov/formsandpubs/publications/Documents/CMS/CHDPPub108.pdf	English	Booklet	Available only		
2	Report of Health Examination for School Entry (PM171a 9/07) Required form.	Eng/Spa	2 sided			
3	Waiver of Health Examination for School Entry (PM171b 9/07) Required form.	Eng/Spa	2 sided			
Immunizations						
4	Immunization Handbook (7 th Edition July 2003) accessible on the web at: http://www.cdph.ca.gov/programs/immunize/Documents/HandbookText.pdf Contains school law info and materials to help implement.	English	Book			
5	Placer County IZ Program Letter to Parents/IZ Clinic Schedule	English	2 sided			
6	Placer County IZ Program Letter to Parents/IZ Clinic Schedule	Spanish	2 sided			
7	Guide to Immunizations Required for School Entry (IMM-231 4/14)	English	1 sided			
8	Immunization Record California School Blue Card (CDPH 286 1/14) Required form.	English	2 sided			
9	Personal Beliefs Exemption to Required Immunizations (CDPH 8262 10/13)	Eng/Spa	2 sided			
10	Immunization Window (IMM-528 4/06)	English	mask			
Local Resources						
11	Placer County CHDP Program brochure	Eng/Spa	Tri-fold			
12	Placer County CHDP Medical Provider list	Eng/Spa	Tri-fold			
13	Placer County CHDP Dental Provider list	Eng/Spa	Tri-fold			
14	Placer County CHDP Vision Provider list	Eng/Spa	Tri-fold			
15	California Health Insurance Resources	Eng/Spa	2 sided			
Health Promotion						
16	Little Changes, Big Rewards, flyer	Eng/Spa	2 sided			

For material distribution, please complete in entirety.

School District:			
School Name:			
Contact Person:			
Physical address:			
Phone:	Email address:	_	
Round Up date and time:		Materials needed by:	